

NEBRASKA STATE FIRE MARSHAL

FIRE ALARM TEST REPORT

Acceptance G
Re-acceptance G Date:
Periodic 1 G 2 G

Name of Installer/Maintenance Company					
Address					
Customer					
Address					
Premises Protected					
Address					
Type of System			Model #		Standby Power Type
Manufacturer			Serial #		Trouble Battery Type
Installed By				and Voltage	
System remotely monitored by			Date 100% smoke calibration performed		
Time of Inspection			Next scheduled		
Time inspection completed and system back in service			Date 100% heat detection last performed		
Smoke Detection Calibration Test method used			Next scheduled		
SYSTEM COMPONENTS		TOTAL QUANTITY	# TESTED	DISCONNECT AC POWER AND CHECK SYSTEM ON EMERGENCY POWER	
Manual Stations				Did Trouble Signal operate properly?	Yes No Date
Heat Detectors				Did Alarm Signal operate properly	Yes No Date
Fixed Temp Non-Restorable Line Type				BATTERY TEST VOLTAGE UNDER 1 AMPERE TEST LOAD	
Fixed Temp Non-Restorable Spot Type				Emergency Power Battery	Type Test Volts
Fixed Temp/Rate of Rise/Restorable				Main Operating Power	Type Test Volts
Restorable Line Type, Pneumatic				What code is system installed under?	
Smoke Detectors				Is system operating according to code?	
Functional				Comments (Note any known deficiencies here)	
Calibrated					
Beam, Infrared or other detectors					
Duct Detectors					
Waterflow Devices (Time to Activate)					
Supervisory Switches					
Audible/Visual Devices					
Annunciators					
Control Unit				List Current Repairs to System and Date of Repairs (use back if needed)	
Lamps and LEDs					
Fuses					
Primary Power Supply					
Secondary Supply					
Magnetic Hold-open Devices					
Fan Relays					
Voice Alarm and 2-way phone					
Trouble Signals					
Alarm Circuit					
Zone Initiating Circuit					
Supervisory Signals					
Ground Fault					
Elevator Controls					
Powered Fire and Smoke Dampers					
Inspector		License #		Witness	
Expiration Date		(For acceptance test only)			
Subscriber					

State Fire Marshal

Report shall be submitted to SFM following each inspection test

SFM 207

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Main Office G
District A G
District B G
District C G